

PATENT APPLICATION SERIAL NO. \_\_\_\_\_

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
FEE RECORD SHEET

10/18/2000 VYANG1 00000056 09688015

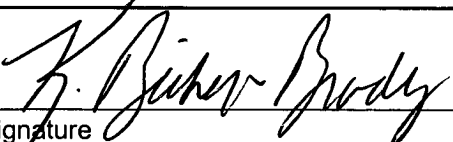
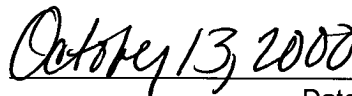
01 FC:201	355.00 OP
02 FC:203	531.00 OP
03 FC:202	400.00 OP
04 FC:204	135.00 OP

PTO-1556  
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JC860 U.S. PTO  
09/688015  
10/13/00

UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR §1.53(b)	
Attorney Docket Number	00742/056003
Applicant	Junying Yuan, Alexei Degterev, Tim Mitchison
Title	SMALL MOLECULE INHIBITORS OF NECROSIS
<b>PRIORITY INFORMATION:</b>	
This application claims priority from United States provisional patent applications serial nos. 60/159,668 and 60/174,749, filed October 15, 1999, and January 6, 2000, respectively.	
<b>APPLICATION ELEMENTS:</b>	
Cover sheet	1 pages
Specification	41 pages
Claims	18 pages
Abstract	1 page
Drawing	8 sheets
Combined Declaration and POA, which is: <input checked="" type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input type="checkbox"/> A copy from prior application [**SERIAL NUMBER**] and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.	3 pages
Statement Deleting Inventors	[**] pages
Sequence Statement	[**] pages
Sequence Listing on Paper	[**] pages
Sequence Listing on Diskette	[**] disk
Small Entity Statements, which are: <input type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input checked="" type="checkbox"/> Copies from prior applications serial nos. 60/159,668 and 60/174,749 and such small entity status is still proper and desired.	2 pages
Preliminary Amendment	[**] pages

IDS	[**] pages
Form PTO 1449	[**] pages
Cited References	[**] references
Recordation Form Cover Sheet and Assignment	[**] pages
Assignee's Statement	[**] pages
English Translation	[**] pages
Certified Copy of Priority Document	[**] pages
Return Receipt Postcard	1
<b>FILING FEES:</b>	
Basic Filing Fee: \$355	\$355.00
Excess Claims Fee: 79 -20 = 59 x \$9	\$531.00
Excess Independent Claims Fee: 13 -3 = 10 \$40	\$400.00
Multiple Dependent Claims Fee: \$135	\$135.00
Total Fees:	\$1,421.00
<input checked="" type="checkbox"/> Enclosed is a check for \$1,421.00 to cover the total fees. <input type="checkbox"/> Charge [**AMOUNT**] to Deposit Account No. 03-2095 to cover the total fees. <input type="checkbox"/> The filing fee is not being paid at this time. <input checked="" type="checkbox"/> Please apply any other charges, or any credits, to Deposit Account No. 03-2095.	
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